In re	Valarie Kay Bethel	According to the calculations required by this statement:
	Debtor(s)	☐ The applicable commitment period is 3 years.
Case N		<b>■</b> The applicable commitment period is 5 years.
	(If known)	■ Disposable income is determined under § 1325(b)(3).
		☐ Disposable income is not determined under § 1325(b)(3).
		(Check the boxes as directed in Lines 17 and 23 of this statement.)

## CHAPTER 13 STATEMENT OF CURRENT MONTHLY INCOME AND CALCULATION OF COMMITMENT PERIOD AND DISPOSABLE INCOME

In addition to Schedules I and J, this statement must be completed by every individual chapter 13 debtor, whether or not filing jointly. Joint debtors may complete one statement only.

	Part I. REPORT OF INCOME									
1	Marital/filing status. Check the box that applies and complete the balance of this part of this statement as directed.  a. ■ Unmarried. Complete only Column A ("Debtor's Income") for Lines 2-10.  b. □ Married. Complete both Column A ("Debtor's Income") and Column B ("Spouse's Income") for Lines 2-10.									
	All figures must reflect average monthly income received from all sources, derived during the six calendar months prior to filing the bankruptcy case, ending on the last day of the month before the filing. If the amount of monthly income varied during the six months, you must divide the six-month total by six, and enter the result on the appropriate line.	Column A  Debtor's Income	Column B Spouse's Income							
2	Gross wages, salary, tips, bonuses, overtime, commissions. \$	8,667.00	\$							
3	Income from the operation of a business, profession, or farm. Subtract Line b from Line a and enter the difference in the appropriate column(s) of Line 3. If you operate more than one business, profession or farm, enter aggregate numbers and provide details on an attachment. Do not enter a number less than zero. Do not include any part of the business expenses entered on Line b as a deduction in Part IV.									
	Debtor Spouse									
	a. Gross receipts \$ 0.00 \$ b. Ordinary and necessary business expenses \$ 0.00 \$									
	b. Ordinary and necessary business expenses \$ 0.00 \$ c. Business income Subtract Line b from Line a \$	0.00	\$							
4	the appropriate column(s) of Line 4. Do not enter a number less than zero. Do not include any part of the operating expenses entered on Line b as a deduction in Part IV.    Debtor   Spouse	0.00	\$							
5	Interest, dividends, and royalties.		\$							
6										
7	Any amounts paid by another person or entity, on a regular basis, for the household expenses of the debtor or the debtor's dependents, including child support paid for that purpose. Do not include alimony or separate maintenance payments or amounts paid by the debtor's spouse. Each regular payment should be reported in only one column; if a payment is listed in Column A, do not report that payment in Column B.		\$							
8	Unemployment compensation. Enter the amount in the appropriate column(s) of Line 8.  However, if you contend that unemployment compensation received by you or your spouse was a benefit under the Social Security Act, do not list the amount of such compensation in Column A or B, but instead state the amount in the space below:									

9	Income from all other sources. Specify source and amount. If on a separate page. Total and enter on Line 9. Do not include a maintenance payments paid by your spouse, but include all of separate maintenance. Do not include any benefits received ur payments received as a victim of a war crime, crime against hum international or domestic terrorism.					
	Debtor	Spouse				
	a. \$   \$   \$   \$   \$	\$ \$		\$ 0.0	0 \$	
10	Subtotal. Add Lines 2 thru 9 in Column A, and, if Column B is	+	rough 9	Ψ 0.0	Ψ	
10	in Column B. Enter the total(s).			\$ 8,667.0	9	
11	<b>Total.</b> If Column B has been completed, add Line 10, Column A the total. If Column B has not been completed, enter the amount			\$		8,667.00
	Part II. CALCULATION OF § 132			PERIOD		
12	Enter the amount from Line 11				\$	8,667.00
13	Marital Adjustment. If you are married, but are not filing jointly calculation of the commitment period under § 1325(b)(4) does not enter on Line 13 the amount of the income listed in Line 10, Colling the household expenses of you or your dependents and specify, income (such as payment of the spouse's tax liability or the spoudebtor's dependents) and the amount of income devoted to each on a separate page. If the conditions for entering this adjustment a.  b. c.	ot require inclusion of the umn B that was NOT pain the lines below, the basse's support of persons of purpose. If necessary, lis	e income d on a reg sis for exc her than t t addition	of your spouse, gular basis for luding this he debtor or the		
	Total and enter on Line 13				\$	0.00
14	Subtract Line 13 from Line 12 and enter the result.				\$	8,667.00
15	Annualized current monthly income for § 1325(b)(4). Multipenter the result.	ly the amount from Line	14 by the	number 12 and	\$	104,004.00
16	<b>Applicable median family income.</b> Enter the median family inc information is available by family size at <a href="www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or					
	a. Enter debtor's state of residence: WA b. E	enter debtor's household s	ize:	1	\$	51,655.00
17	<ul> <li>Application of § 1325(b)(4). Check the applicable box and proc</li> <li>□ The amount on Line 15 is less than the amount on Line 16 top of page 1 of this statement and continue with this statement.</li> <li>■ The amount on Line 15 is not less than the amount on Line at the top of page 1 of this statement and continue with this statement.</li> </ul>	. Check the box for "The ent.  e 16. Check the box for "				•
	Part III. APPLICATION OF § 1325(b)(3) FO	R DETERMINING DIS	POSABI	LE INCOME		
18	Enter the amount from Line 11.				\$	8,667.00
19	Marital Adjustment. If you are married, but are not filing jointly any income listed in Line 10, Column B that was NOT paid on a debtor or the debtor's dependents. Specify in the lines below the payment of the spouse's tax liability or the spouse's support of pedependents) and the amount of income devoted to each purpose, separate page. If the conditions for entering this adjustment do not a.  a.  b.	regular basis for the hou basis for excluding the Cersons other than the debt If necessary, list addition ot apply, enter zero.	sehold ex olumn B or or the	penses of the income(such as debtor's		
	Total and enter on Line 19.	\$	l		ď	0.00
20	Current monthly income for § 1325(b)(3). Subtract Line 19 fro	om Line 18 and onton the	racult		\$	0.00
20	Current monthly income for § 1325(b)(3). Subtract Line 19 IIC	on Line to allu eliter the	resuit.		\$	8,667.00

	<b>Annualized current monthly income for § 1325(b)(3).</b> Multiply the amount from Line 20 by the number 12 and enter the result.						and	\$	104,004.00	
22	Applio	Applicable median family income. Enter the amount from Line 16.					\$	51,655.00		
	Application of § 1325(b)(3). Check the applicable box and proceed as directed.								I	
23		e amount on Line 21 is mo 25(b)(3)" at the top of page						determ	ined u	ınder §
	☐ The amount on Line 21 is not more than the amount on Line 22. Check the box for "Disposable income is no 1325(b)(3)" at the top of page 1 of this statement and complete Part VII of this statement. Do not complete Part									
		Part IV. C	ALCULATION (	OF I	DEDU	CTIONS FR	OM INCOME	C		
		Subpart A: D	eductions under Sta	ndar	ds of th	ne Internal Reve	nue Service (IRS	5)		
24A	Enter i applica bankru	nal Standards: food, appar in Line 24A the "Total" ame able number of persons. (T aptcy court.) The applicable ar federal income tax return	ount from IRS National his information is availant number of persons is the	Standable able nur	dards for it www.u mber tha	Allowable Living sdoj.gov/ust/ or fr t would currently l	Expenses for the om the clerk of the be allowed as exemp		\$	565.00
24B	National Standards: health care. Enter in Line a1 below the amount from IRS National Standards for Out-of-Pocket Health Care for persons under 65 years of age, and in Line a2 the IRS National Standards for Out-of-Pocket Health Care for persons 65 years of age or older. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) Enter in Line b1 the applicable number of persons who are under 65 years of age, and enter in Line b2 the applicable number of persons who are 65 years of age or older. (The applicable number of persons in each age category is the number in that category that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support.) Multiply Line a1 by Line b1 to obtain a total amount for persons under 65, and enter the result in Line c1. Multiply Line a2 by Line b2 to obtain a total amount for persons 65 and older, and enter the result in Line c2. Add Lines c1 and c2 to obtain a total health care amount, and enter the result in Line 24B.						e or ently hom in			
	C2. 7 IG	d Lines er and ez to obtain	a total ficaltif care allo	um, a	ina enter	the result in Line	24B.			
		ons under 65 years of age	a total ficaltif care allo	1		years of age or old				
			60	Pers	sons 65			144		
	Perso	ons under 65 years of age		Pers	Allowa	years of age or olo		144		
	Perso	Allowance per person	60	Pers a2. b2.	Allowa	years of age or old ance per person er of persons			\$	60.00
25A	a1. b1. c1.  Local Utilitie availat the nur	Allowance per person Number of persons	60.00 tilities; non-mortgage expenses for the application from the clerk of the been allowed as exemption	Pers a2. b2. c2. expensable coankru	Allowa Number Subtot Subtot nses. Ent	years of age or old ance per person er of persons al er the amount of the nd family size. (The	ne IRS Housing and his information is e family size consist	0 0.00 ts of	\$	
25A 25B	Personal.  b1.  c1.  Local Utilities availabe the numeral availabets see the numeral available the numeral availab	Allowance per person Number of persons Subtotal  Standards: housing and uses Standards; non-mortgage ble at www.usdoj.gov/ust/omber that would currently by	tilities; non-mortgage expenses for the applicate allowed as exemption you support.  tilities; mortgage/rent mortgage/rent expense for from the clerk of the beallowed as exemption you support); enter on I ated in Line 47; subtractions	Pers a2. b2. c2. expensible coankrus on y expersion your open your	Allowa Number Subtot Su	er the amount of the truth. The applicable eral income tax ret er, in Line a below y and family size (urt) (the applicable eral income tax ret l of the Average M	ne IRS Housing and his information is e family size consist urn, plus the numbe this information is a family size consist urn, plus the numbe fonthly Payments fo	ts of r of IRS s of r of r any		403.00
	Personal.  a1.  b1.  c1.  Local Utilities availabe the nurse any add Local Housin availabe the nurse any add debts so not en a.	Allowance per person Number of persons Subtotal  Standards: housing and uses Standards; non-mortgage ble at www.usdoj.gov/ust/omber that would currently biditional dependents whom a standards: housing and using and Utilities Standards; non-mortgage ble at www.usdoj.gov/ust/omber that would currently biditional dependents whom the secured by your home, as stater an amount less than zero.	tilities; non-mortgage expenses for the application of the clerk of the beallowed as exemption you support.  tilities; mortgage/rent mortgage/rent expense for from the clerk of the beallowed as exemption you support); enter on I are allowed in Line 47; subtraction.  Standards; mortgage/rent expense for from the clerk of the beallowed as exemption you support); enter on I are allowed in Line 47; subtraction.	Pers a2. b2. c2. expen able coankruss on y exper cor you askruss on y t Line t Line	Allowa Number Subtot Su	er the amount of the truth. The applicable eral income tax ret er, in Line a below y and family size (urt) (the applicable eral income tax ret l of the Average M	ne IRS Housing and his information is e family size consisturn, plus the number of the this information is e family size consisturn, plus the number of the this information is e family size consister, plus the number of the result in Line 25E	ts of r of IRS s of r of r any		
	Personal.  al.  bl.  cl.  Local Utilities availabe the numany add Local Housing availabe the numany add debts sonot en a.  b.	Allowance per person Number of persons Subtotal  Standards: housing and uses Standards; non-mortgage ble at www.usdoj.gov/ust/omber that would currently biditional dependents whom standards: housing and using and Utilities Standards; no mber that would currently biditional dependents whom see at www.usdoj.gov/ust/omber that would currently biditional dependents whom secured by your home, as stater an amount less than zet IRS Housing and Utilities Average Monthly Payment home, if any, as stated in I	tilities; non-mortgage expenses for the application from the clerk of the beallowed as exemption you support.  tilities; mortgage/rent expense for from the clerk of the beallowed as exemption you support); enter on I are allowed as exemption you support); enter on I are allowed as exemption you support); enter on I are allowed in Line 47; subtraction.  Standards; mortgage/rent for any debts secured bearing 47	Pers a2. b2. c2. expen able coankruss on y exper cor you askruss on y t Line t Line	Allowa Number Subtot Su	er the amount of the the applicable eral income tax ret eral income tax ret eral income tax ret eral income tax ret of the Average Mand enter the and enter the second enter the and enter the second enter the se	ne IRS Housing and his information is e family size consisturn, plus the number, the amount of the this information is e family size consisturn, plus the number and the family size consisturn, plus the number and the result in Line 25E 1,30	ts of r of IRS s of r any 3. Do	\$	403.00
	Personal.  b1.  c1.  Local Utilities availabe the numerous availabets availab	Allowance per person Number of persons Subtotal  Standards: housing and uses Standards; non-mortgages ble at www.usdoj.gov/ust/omber that would currently biditional dependents whom standards: housing and use and Utilities Standards; non-mortgages ble at www.usdoj.gov/ust/omber that would currently biditional dependents whom secured by your home, as stater an amount less than zee IRS Housing and Utilities Average Monthly Payment home, if any, as stated in I. Net mortgage/rental expen	tilities; non-mortgage expenses for the application of the clerk of the beallowed as exemption you support.  tilities; mortgage/rent mortgage/rent expense for from the clerk of the beallowed as exemption you support); enter on I ated in Line 47; subtractor.  Standards; mortgage/rent for any debts secured beallowed to the clerk of the secured to the control of the clerk of the secured in Line 47; subtractors.	Pers a2. b2. c2. expensable coankrus on y inne bt t Line	Allowa Number Subtot Su	er the amount of the three per person al three per persons al three persons are persons and family size. (Three persons are persons	ne IRS Housing and his information is e family size consist urn, plus the numbe this information is family size consister, plus the numbe touthly Payments for the result in Line 25E 1,30 com Line a.	0 0.00 ts of r of IRS s of r of r any 3. Do		403.00
	Personal.  b1.  c1.  Local Utilities availabe the numerous availabe the numerous availabe the numerous any addebts as not en  a.  b.  c.  Local 25B do Standa	Allowance per person Number of persons Subtotal  Standards: housing and uses Standards; non-mortgage ble at www.usdoj.gov/ust/omber that would currently biditional dependents whom standards: housing and using and Utilities Standards; no mber that would currently biditional dependents whom see at www.usdoj.gov/ust/omber that would currently biditional dependents whom secured by your home, as stater an amount less than zet IRS Housing and Utilities Average Monthly Payment home, if any, as stated in I	tilities; non-mortgage expenses for the applicate allowed as exemption you support.  tilities; mortgage/rent mortgage/rent expense for from the clerk of the beallowed as exemption you support); enter on I ated in Line 47; subtractor.  Standards; mortgage/rent for any debts secured bear for any debts of the total for	Pers  a2.  b2.  c2.  experience so your construction of your construction of your construction of the temperature of your case of your	Allowa Number Subtot Su	er the amount of the that the process set ed under the IRS F	ne IRS Housing and his information is e family size consist urn, plus the numbe this information is family size consist urn, plus the numbe touthly Payments for the result in Line 25E 1,30 com Line a.	0 0.00 ts of r of IRS s of r of any 3. Do 06.00 0.00	\$	

				$\neg$			
	Local Standards: transportation; vehicle operation/public transportation expense allowance in this category regardless of whether you pay the regardless of whether you use public transportation.						
	Check the number of vehicles for which you pay the operating expens						
27A	included as a contribution to your household expenses in Line 7. $\square$ 0	$1 \square 2$ or more.					
	If you checked 0, enter on Line 27A the "Public Transportation" amount from IRS Local Standards: Transportation. If you checked 1 or 2 or more, enter on Line 27A the "Operating Costs" amount from IRS Local Standards: Transportation for the applicable number of vehicles in the applicable Metropolitan Statistical Area or Census Region. (These amounts are available at <a href="www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.)						
27B	Local Standards: transportation; additional public transportation for a vehicle and also use public transportation, and you contend that your public transportation expenses, enter on Line 27B the "Public To Standards: Transportation. (This amount is available at <a href="www.usdoj.gc">www.usdoj.gc</a> court.)		0.00				
	Local Standards: transportation ownership/lease expense; Vehicle you claim an ownership/lease expense. (You may not claim an owner ownership/lease)						
	vehicles.) ■ 1 □ 2 or more.						
28	Enter, in Line a below, the "Ownership Costs" for "One Car" from the (available at <a href="www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy Monthly Payments for any debts secured by Vehicle 1, as stated in Li the result in Line 28. <b>Do not enter an amount less than zero.</b>	court); enter in Line b the total of the Average					
	a. IRS Transportation Standards, Ownership Costs	\$ 517.00					
	Average Monthly Payment for any debts secured by Vehicle 1, as stated in Line 47	\$ 0.00					
	c. Net ownership/lease expense for Vehicle 1	Subtract Line b from Line a.	\$ 51	7.00			
29	Enter, in Line a below, the "Ownership Costs" for "One Car" from the (available at <a href="www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy Monthly Payments for any debts secured by Vehicle 2, as stated in Li the result in Line 29. <b>Do not enter an amount less than zero.</b>						
	a. IRS Transportation Standards, Ownership Costs						
	Average Monthly Payment for any debts secured by Vehicle 2, as stated in Line 47	\$ 0.00	Φ	0.00			
	c. Net ownership/lease expense for Vehicle 2	Subtract Line b from Line a.	\$	0.00			
30	Other Necessary Expenses: taxes. Enter the total average monthly e state, and local taxes, other than real estate and sales taxes, such as in security taxes, and Medicare taxes. Do not include real estate or sale	come taxes, self employment taxes, social	\$ 2,40	6.00			
31	Other Necessary Expenses: involuntary deductions for employment deductions that are required for your employment, such as mandatory uniform costs. Do not include discretionary amounts, such as volu	\$	0.00				
32	Other Necessary Expenses: life insurance. Enter total average mon life insurance for yourself. Do not include premiums for insurance any other form of insurance.		\$	0.00			
33	Other Necessary Expenses: court-ordered payments. Enter the tot pay pursuant to the order of a court or administrative agency, such as include payments on past due obligations included in line 49.		0.00				
34	Other Necessary Expenses: education for employment or for a phythe total average monthly amount that you actually expend for educate education that is required for a physically or mentally challenged dep providing similar services is available.	ion that is a condition of employment and for		0.00			
35	Other Necessary Expenses: childcare. Enter the total average mont childcare - such as baby-sitting, day care, nursery and preschool. <b>Do</b>			0.00			

36	Other Necessary Expenses: health care. Enter the total average monthly amount that you actually expend on health care that is required for the health and welfare of yourself or your dependents, that is not reimbursed by insurance or paid by a health savings account, and that is in excess of the amount entered in Line 24B. Do not include payments for health insurance or health savings accounts listed in Line 39.	\$ 0.00
37	Other Necessary Expenses: telecommunication services. Enter the total average monthly amount that you actually pay for telecommunication services other than your basic home telephone and cell phone service - such as pagers, call waiting, caller id, special long distance, or internet service-to the extent necessary for your health and welfare or that of your dependents. Do not include any amount previously deducted.	\$ 0.00
38	Total Expenses Allowed under IRS Standards. Enter the total of Lines 24 through 37.	\$ 5,843.00
	Subpart B: Additional Living Expense Deductions	
	Note: Do not include any expenses that you have listed in Lines 24-37	
	<b>Health Insurance, Disability Insurance, and Health Savings Account Expenses.</b> List the monthly expenses in the categories set out in lines a-c below that are reasonably necessary for yourself, your spouse, or your dependents.	
39	a. Health Insurance \$ 546.00	
	b. Disability Insurance \$ 0.00	
	c. Health Savings Account \$ 0.00	
	Total and enter on Line 39	\$ 546.00
	If you do not actually expend this total amount, state your actual total average monthly expenditures in the space below:  \$	
40	Continued contributions to the care of household or family members. Enter the total average actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses. Do not include payments listed in Line 34.	\$ 173.20
41	<b>Protection against family violence.</b> Enter the total average reasonably necessary monthly expenses that you actually incur to maintain the safety of your family under the Family Violence Prevention and Services Act or other applicable federal law. The nature of these expenses is required to be kept confidential by the court.	\$ 0.00
42	Home energy costs. Enter the total average monthly amount, in excess of the allowance specified by IRS Local Standards for Housing and Utilities that you actually expend for home energy costs. You must provide your case trustee with documentation of your actual expenses, and you must demonstrate that the additional amount claimed is reasonable and necessary.	\$ 0.00
43	Education expenses for dependent children under 18. Enter the total average monthly expenses that you actually incur, not to exceed \$147.92 per child, for attendance at a private or public elementary or secondary school by your dependent children less than 18 years of age. You must provide your case trustee with documentation of your actual expenses, and you must explain why the amount claimed is reasonable and necessary and not already accounted for in the IRS Standards.	\$ 0.00
44	Additional food and clothing expense. Enter the total average monthly amount by which your food and clothing expenses exceed the combined allowances for food and clothing (apparel and services) in the IRS National Standards, not to exceed 5% of those combined allowances. (This information is available at <a href="https://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.) You must demonstrate that the additional amount claimed is reasonable and necessary.	\$ 19.00
45	Charitable contributions. Enter the amount reasonably necessary for you to expend each month on charitable contributions in the form of cash or financial instruments to a charitable organization as defined in 26 U.S.C. § 170(c)(1)-(2). Do not include any amount in excess of 15% of your gross monthly income.	\$ 100.00
46	Total Additional Expense Deductions under § 707(b). Enter the total of Lines 39 through 45.	\$ 838.20

		Subpart C: Deductions for	Debt Pay	ment			
47	Future payments on secured cla own, list the name of creditor, ide check whether the payment inclu- scheduled as contractually due to case, divided by 60. If necessary Payments on Line 47.						
	Name of Creditor	Property Securing the Debt	Mo	erage onthly oment	Does payment include taxes or insurance		
	a. WSECU	1999 GMAC truck (168,959 miles)	\$	11.85 Add Lines	□yes ■no	\$	11.85
48	motor vehicle, or other property in your deduction 1/60th of any among payments listed in Line 47, in ord sums in default that must be paid	ms. If any of debts listed in Line 47 are necessary for your support or the support out (the "cure amount") that you must ler to maintain possession of the proper in order to avoid repossession or forecl list additional entries on a separate page.  Property Securing the Debt	e secured by t of your de pay the cred ty. The cure osure. List a	your prima pendents, yo itor in addit amount wo nd total any	ou may include in ion to the uld include any	Ψ	
	aNONE-	Froperty Securing the Debt	\$				
	Payments on proposition prioris	y claims. Enter the total amount, divid	ad by 60, of		Total: Add Lines	\$	0.00
49	priority tax, child support and ali not include current obligations,	nony claims, for which you were liable such as those set out in Line 33.	at the time of	of your bank	cruptcy filing. <b>Do</b>	\$	12.19
	Chapter 13 administrative experesulting administrative expense.	nses. Multiply the amount in Line a by	the amount	in Line b, a	nd enter the		
50	b. Current multiplier for yo issued by the Executive (	ly Chapter 13 plan payment.  our district as determined under schedule Office for United States Trustees. (This out www.usdoj.gov/ust/ or from the clerk			1,961.76 3.75		
		strative expense of chapter 13 case		Multiply Li	nes a and b	\$	73.57
51	<b>Total Deductions for Debt Payr</b>	nent. Enter the total of Lines 47 throug	h 50.			\$	97.61
	1	Subpart D: Total Deduction	s from In	come			
52	Total of all deductions from inc	ome. Enter the total of Lines 38, 46, ar	nd 51.			\$	6,778.81
	Part V. DETER	MINATION OF DISPOSABLE	E INCOM	IE UNDI	ER § 1325(b)(2)	)	
53	Total current monthly income.	Enter the amount from Line 20.	·	·		\$	8,667.00
54	<b>Support income.</b> Enter the monthly average of any child support payments, foster care payments, or disability payments for a dependent child, reported in Part I, that you received in accordance with applicable nonbankruptcy law, to the extent reasonably necessary to be expended for such child.					\$	0.00
55		s. Enter the monthly total of (a) all among ded retirement plans, as specified in § 54 pecified in § 362(b)(19).				\$	0.00
56	Total of all deductions allowed	under § 707(b)(2). Enter the amount fi	om Line 52			\$	6,778.81

must sign.)

61

Date: **January 11, 2013** 

	Deduction for special circumstances. If there are special circumstances that justify additional expenses for which there is no reasonable alternative, describe the special circumstances and the resulting expenses in lines a-c below. If necessary, list additional entries on a separate page. Total the expenses and enter the total in Line 57. You must provide your case trustee with documentation of these expenses and you must provide a detailed explanation of the special circumstances that make such expense necessary and reasonable.						
57		Nature of special circumstances	Am	ount of Expense			
	a.		\$		4		
	b.		\$				
	c.		1	al: Add Lines	\$	0.0	
58	<b>Total adjustments to determine disposable income.</b> Add the amounts on Lines 54, 55, 56, and 57 and enter the result.						
59	Mon	\$	1,888.19				
		Part VI. ADDITIONAL EXPEN	SE	CLAIMS			
	of yo	er Expenses. List and describe any monthly expenses, not otherwise states and your family and that you contend should be an additional deduction b)(2)(A)(ii)(I). If necessary, list additional sources on a separate page item. Total the expenses.	on fr	om your current monthly income	under	§	
60		Expense Description		Monthly Amoun	t		
	a.			\$	-		
	b. c.			\$	-		
	d.			\$	1		
		Total: Add Lines a, b, c and d		\$			
		Part VII. VERIFICATIO	N				

I declare under penalty of perjury that the information provided in this statement is true and correct. (If this is a joint case, both debtors

Signature: /s/ Valarie Kay Bethel

Valarie Kay Bethel (Debtor)